SUBMIT: <u>COMPLETED</u> APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATI BANFIED (00 

03 2012	sived)	DIN TY WISCONSIN	ION FOR PERMIT
	<b>A</b>	D,	Pe

Refund: ermit#: nount Paid: te: S 8 8 7 80 71/5/14

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

Bayfield Co. Zoning Dept.

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IO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT	APPLICANT.	HOW DO I FILL O	HOW DO I FILL OUT THIS APPLICATION (VISIT OUT WEDS	I Ou website www.	The MAMMerical Succession of THE MAMMERICAL S
TYPE OF PERMIT REQUESTED-   X LAND USE - SANITARY - PRIVY	ITARY 🗆 PRIVY	□ CONDITIO	☐ CONDITIONAL USE ☐ SPECIAL USE		☐ B.O.A. ☐ OTHER
Owner's Name: RITA L. VIAGER	Mailing Address:		City/State/Zip:		Telephone: 7/5-372-5/ナイ
CAROL H. NOVAK					On the state of th
Address of Property:	City/State/Zip:				Call Tilone:
10150 TELDEE TAAH	IRON RIVER WI SYBYT	, <u>7</u>	74843		A A A A A A A A A A A A A A A A A A A
	Contractor Phone:	Plumber:			Plumber Phone:
en their alter obside	218-391-6874	74	L. Walter		
	Agent Phone:	Agent Mailing	Agent Mailing Address (include City/State/Zip):	tate/Zip):	Written Authorization
	ŕ		=		☐ Yes ☐ No
BOILETT	PIN: (23 sligits)	3	3 20 202	Recorded Docume	Document: (i.e. Property Ownership)
Legal Description: (Use Tax Statement)	04 024 × 2-4	7-06-5	04 024 2-47-06-37-403-000 Volume_	Volume	Page(s)
1/4,1/4 Gov't Lot   Lot(s)	CSM Vol & Page		Lot(s) No. Block(s) No.	Subdivision:	
37	Town of:			Lot Size	Acreage
Section 34 , Township 747 N, Range K B W		IRON RUER	ER		0.690
☐ is Property / and within 300 feet of River, Stream (incl. Intermittent)	er, Stream (incl. Intermitte	nt) Distance	Structure is from Shor		Is Property in Are Wetlands
יי ליינינית האירות של היווד ניכל המתר כי ביולר	Carlo	(1) (1)		_	

☐ Shoreland

Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue

Distance Structure is from Shoreline :

feet

Floodplain Zone? ☐ Yes

Present? ☐ Yes ÆNo

Creek or Landward side of Floodplain?

Value at Time of Completion * include donated time &	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	stem ty?	Watei
11 144 144 144	☐ New Construction	☐ 1-Story	☐ Seasonal	_ 1	☐ Municipal/City		☐ City
	☐ Addition/Alteration	+ Loft	X Year Round	□ 2	X (New) Sanitary Specify Type:	pe:	λwe≣
5 28 28 28 28	Conversion	X 2-Story		<b>X</b> 3	☐ Sanitary (Exists) Specify Type:	/pe:	
1000	☐ Relocate (existing bldg)	☐ Basement			☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	(min 200 gallon)	
	Run a Business on	▼ No Basement		□ None	☐ Portable (w/service contract)	t)	
	Property	☐ Foundation			☐ Compost Toilet		•
	X HANDICAP			The state of the s	None	- the state of the	
	AUESS TO LAKE						
Existing Structure	Existing Structure: (If permit being applied for is relevant to it)	r is relevant to it)	Length:		Width:	Height:	
Proposed Construction:	iction:		Length:	<b>3</b>	Width:	Height:	

۲,	Proposed Structure	Dimensions	Footage
	Principal Structure (first structure on property)	×	)
	Residence (i.e. cabin, hunting shack, etc.)	×	
	with Loft	×	-
	with a Porch	×	
	, with (2nd) Porch ACESSIBLE EGRESS TROM LAUSE	×	-
	10'x20 with affects/RAMP/SIDEMALL TO LAKE	×	_
	with (2 <sup>nd</sup> ) Deck	×	-
	with Attached Garage > 40 / X 13	×	) 4 G
	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	×	
	Mobile Home (manufactured date)	×	
	Addition/Alteration (specify)	( x	
	Accessory Building (specify)	×	
	Accessory Building Addition/Alteration (specify)	×	
	Special Use: (explain)	×	
	Conditional Use: (explain)	×	
X.	Other: (explain) LAPE Acress Shudwe (W) Acress ()848	×	
1			100
			Principal Structure (first structure on property)  Residence (i.e. cabin, hunting shack, etc.)  with Loft  with a Porch  with 2 <sup>nd</sup> Porch  with (2 <sup>nd</sup> ) Porch  with (2 <sup>nd</sup> ) Deck  Addition/Alteration (specify)  Addition/Alteration (specify)  Accessory Building Addition/Alteration (specify)  Special Use: (explain)  Conditional Use: (explain)  Other: (explain)  Accessory Building Addition/Alteration (specify)  Conditional Use: (explain)  (1)  Conditional Use: (explain)  (2)  Conditional Use: (explain)

Rec'd for Issuance signing on behalf of the owner(s) a letter of authorization must accompany this application) Owner(s): Laboration (if there are Multiple Owners listed Authorized Agent: on the Deed All Owners must sign or letter(s) of authorization must actompany this application) Date

Date

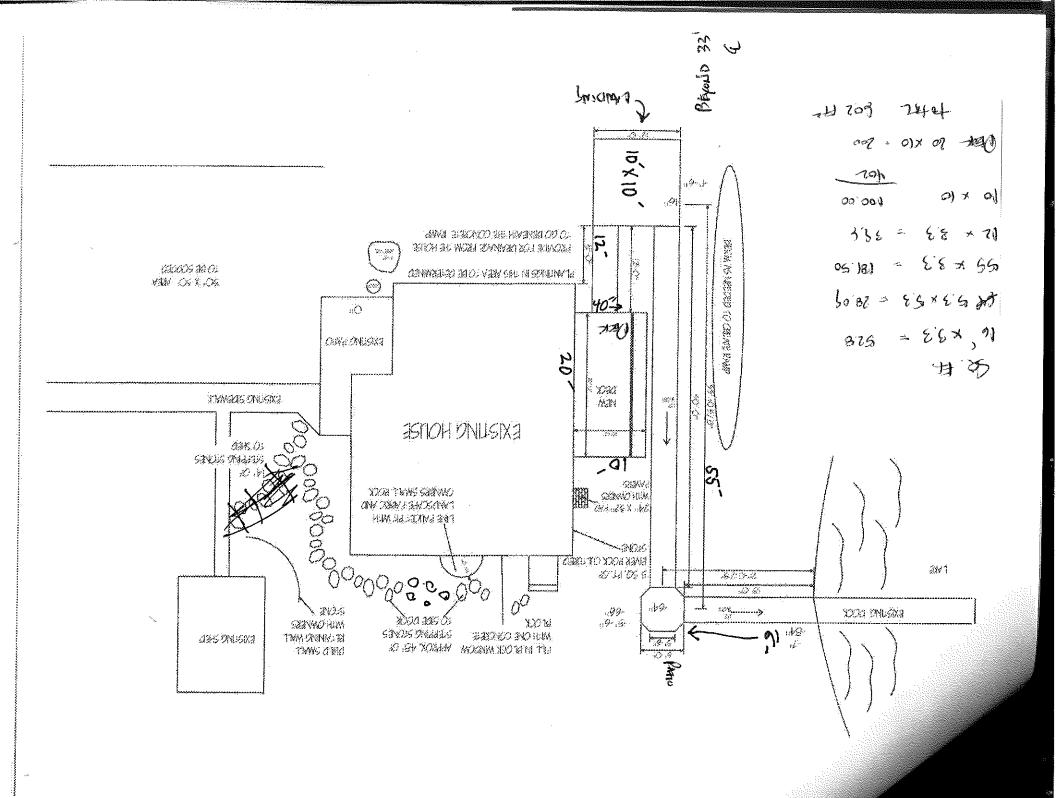
7.3-12

Address to send permit 10150 TEEPEE TRAIL, TRON RIVER, WI STRY I FYOU FECEN
JULY 2018
8-8
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE
SOCRETARIAL STATE LETTER TOO NOA? RANGOVAL CON DITION

(Copy of Tax Statement Copy of Tax Statement If you recently purchased the property send your Recorded Deed

CONDITION?

Show Location of: Show / Indicate:	ion of:  Proposed Construction cate:  North (N) on Plot Plan (*) This can be add (North Control Pond)	tion	
	All Existing Structures on your F (*) Well (W); (*) Septic Tank (S1 (*) Lake; (*) River; (*) Stream/C (*) Wetlands; or (*) Slopes over	All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%	or (*) <b>Privy</b> (P)
	Capanily as		
			·
Please complete (1) (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)	o continuing) the closest point)	Changes in plans must be approve	roved by the Planning & Zoning Dept.
Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	d >33 Feet	Setback from the Lake (ordinary nigh-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	r mark) / to Feet
Setback from the <b>North</b> Lot Line Setback from the <b>South</b> Lot Line	▶33 (		Feet
Setback from the West Lot Line Setback from the East Lot Line	>5c' Feet	Setback from 20% Slope Area Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank Setback to Drain Field	> 10 Feet	Setback to Well	Feet
Setback to Privy (Portable, Composting)  Prior to the placement or construction of a structure within ten (10) feet other previously surveyed corner or marked by a licensed surveyor at the Prior to the placement or construction of a structure more than ten (10) one previously surveyed corner, to the other previously surveyed corner,	Feet  In (10) feet of the minimum required setback, t eyor at the owner's expense.  In ten (10) feet but less than thirty (30) feet fro ed corner, or verifiable by the Department by t	Setback to Privy (Portable, Composting)	visible from one previously surveyed corner to the setback must be measured must be visible from he proposed site of the structure, or must be
(9) Stake or Mark Proposed  NOTICE: All Land For The Construction Of N. T	I Location(s) of New Construction (s) of New Construction (s) Year factor of the Permits Expire One (1) Year factor of the New One & Two Family Dwelling: A city, State the local Town, Village, City, State	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Privy (P), and Well (W).  NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	k (HT), Privy (P), and Well (W). ot begun. rm Dwelling Code.
Issuance Information (County Use Only) Permit Denied (Date):	nly) Sanitary Number: Reason for Denial:	# of bedrooms: *	Sanitary Date:
Permit # 12 1/27%	. 1	8-12	
I Lot □ Yes ship □ Yes ning • Yes	(Deed of Record) KNo (Fused/Contiguous Lot(s)) No	Mitigation Required XYes □ No Mitigation Attached □ Yes □ No William Value □ Conference  Mitigation Attached □ Yes □ No	Affidavit Required XVes □No Affidavit Attached XVes □No
92 H		Previously Granted by Variance (B.O.A.)  ☐ Yes X.No	
illy Created Delineated	Kyes □ No	Property Lines Represented by Ow Was Property Surve	XYes ONO
	24 PA	Addition of the contract the start for	District ( <b>C-(</b>
J-10-1	Inspected by:	₩C	7
Board Co Skooth	`\ 7	Dives Divided they need to be attached.)  THEN A MECANDED METHODANT MORPH AS DO	o the minutational
Signature of Inspector:			Date of Apptypyal:
Hold For Sanitary:  Hold For TBA:	BA: Hold For Affidavit:	ffidavit. 🔲 Hold For Fees: 🗎	



SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT,AND FEE TO: **Bayfield County** 

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Date Staff (Received) APPLICATION FOR PERMIT

BAYFIED COUNTY WISDORSIN

AUG 08 2012

1818 57-55 50-75	Date: Amount Paid:	Permit #:
12 PS 80 80 80 80 80 80 80 80 80 80 80 80 80	8:9:18	

INSTRUCTIONS: No permits will be issued until all fees are paid.

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HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

CONDITIONAL USE SPECIAL USE City/State/Zip:

☐ B.O.A.

OTHER

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MANCY

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PIKE

AMBLER

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19002

Telephone: 215-628-4

799

TYPE OF PERMIT REQUESTED - X LAND USE SANITARY PRIVY OWNER'S Name;

OWNER'S Name;

OWNER'S NAME;

OWNER'S NAME OF THE PRIVATE OF THE PRIVATE

I (we) declare that this application am (are) responsible for the diamy be a result of Bayfield contained the described property at an above described property at an Owner(s):							Municipal Iso			Commercial Use				🛚 Residential Use			Proposed Use	10.5	Existing Structure: (If p	- The state of the		2 6	18,000	T		Value at Time of Completion * include donated time & material	□ Non-Shoreland	⊋ ls	Should C	section 20,	SE VA, YE	LOCATION Lega		MHOP WES	LEE WESTLUND	66645 GRAVEL	Address of Property:
FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES  failure to Obtain a pickage information for it will be responsible for the detail and accuracy of all information f (we) and (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a real providing and that it will be relied upon by Bayfield County in determining whether to issue a real providing in or with this application. I (we) consent to county officials charged with administering above described property at any easynable time for the purpose of inspection.  Owner(s):  Owner(s):  County officials charged with administering the providing in or with this application. I (we) consent to county officials charged with administering above described property at any easynable time for the purpose of inspection.	Cuien (explain)	Other: (explain)	Conditional like: (explain)	Sancial II	P = Accessory suit	<del> </del> -	<u> </u>		☐ Bunkhouse w/ (☐ sanitary, or	wit	wit	wit	wit	Wit	lesidence (i.e.	Principal Struct	V		(If permit being applied for is relevant to it)		<b>X</b>	Run a Business on Run Run Run Run Run Run Run Run Run Ru		teration 🗆	New Construction 😾 1	Project # (What are you applying for) and/		✓ Is Property/Land within 1000 feet of Lake, Pond or Flowage  If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)  Creek or Landward side of Floodplain? If yes—continue —▶	Township 47 N, Range	1/4 Gov't Lot	Legal Description: (Use lax statement)	- 1:	MUDICAL RESULT SELECTION OF THE MAN AND TH	CZ D	VEL PIT KOAD	, 3
N A PERMIT OF STARTING CONS mation) has been examined by me (, we) am (are) providing and that it wi ) am (are) providing in or with this nspection.  The providing in or with this in the constant of the con	The state of the s	E. (CAPIDITE)	p. (eyplain)	DICCOR(	P F D PAYM	ling (specity)		'نوا ا	🗀 sanitary, or 🗀 sleeping quarters,	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	3	with a Porch	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)	Proposed	Length:			Foundation	No Basement	2-Story	+ Loft 🔏	1-Story    Seasonal	# of Stories and/or basement Use		eet of Lake, Pond or Flowage If yescontinue	et of River, Stream (incl. Intermitt plain? If yescontinue -	w &	Lot(s) CSM Vol	150 to		- 1		D IRON RIVER	City/State/Zip:
TRUCTION WITHOUT A PERMIT sity and to the best of my (our) know ill be relied upon by Bayfield Count application. I (we) consent to count for the count for		- the state of the	The second secon	and Address of the second seco	(apostily)	(specify) ADD 1 TAGU	The state of the s	The state of the s	I옥 □	1944						operty)	Proposed Structure		Length: 36			□ None		2	图 1	e of bedrooms		ge Distance Structure is from		IRON RIVER IN	Vol & Page Lot(s) No.	- N		7655 PO BOX 366	<b></b> _	VER, WI S	-
r WILL RESULT IN PENALTIES lividege and belief it is true, correct a y in determining whether to issue a y officials charged with administerion this application?		and the second s	- The state of the		- 13	1 22. W	The state of the s	- Although	cooking & food prep facilities)					MAN TO THE PARTY OF THE PARTY O				Width: / O	S.	□ None		Portable (w/service	Privy (Pit) or Vau	(New) Sanitary	Municipal/City	What Type of Sewer/Sanitary System is on the property?		ure is from Shoreline :	Distance Structure is from Shoreline : feet	UI COURSE	Block(s) No. Subdivision	+		& IRON RUER	Agent Mailing Address (include City/State/Zip):	7647	
nd complete.   (we) acknowledge that I (we) permit. I (we) further accept liability which ng county ordinances to have access to the	Ì		x }	×	-	10 × 12 )	Y )	-	< ×		×	×	X )	x )	××		Dimensions Fo	Height:	8		11400	ontract)	ulted (min 200 gallon)	Specify Type:	The state of the s	pe of iry System operty?			Is Property in Are Floodplain Zone? P		-	Page(s)	ocument: (i.e. Prop	TW	Written Authorization	6)0_4/0-3	Cell Phone:
hat I (we) lity which ess to the					9	2			- Company								Square Footage		,					⊒ × Well	City	Water		No (	Are Wetlands Present?				wnership)		ization	ز	200

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2012

(If you are signing Address to send permit

gon behalf of the owner(s) a letter of aut

must accompany this application)

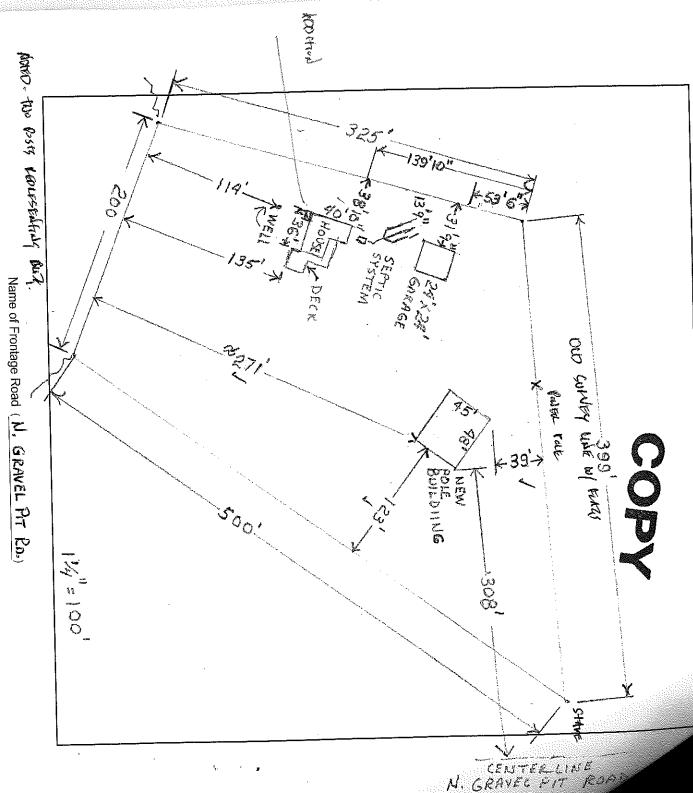
Date

Attach
Copy of Tax Statement
recently purchased the property send your Recorded Deed

Authorized Agent: \_

	Hold For Fees:	Hold For Affidavit:	fold For Sanitary: Hold For TBA:
Date of Approval:			Cator: A Table
	to be attached.)	☐ Yes ☐ No –(If No they need	Condition(s):Town, Committee of Board Conditions Attached?
ion:		Inspected by: DC	712
Zoning District    Akor Classification	ODANO - ME CRAINS	SO CELEMATERIAL CE DOLLYNY	inspection record included the Co. Controlled was
₹Yes	perty unes Represented to Was Property	B B B B B B B B B B B B B B B B B B B	
#	Yes □ No Case #:		Yes □ No   Case #:
Affidavit Required ☐ Yes KNo Affidavit Attached ☐ Yes KNo	□ Yes XNo	ANO O	ng □Yes
		Permit Date:	Permit #: /2 -0280
Sanitary Date: [987—	#or bedrooms: 3	Reason for Denial:	Issuance Information (County Use Only) Permit Denied (Date):
	Issuance if Construction or Use has I seemed to Enforce The Unifocies may also require permits.	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling. The local Town, Village, City, State or Federal agencies may also require permits.	NOTICE: All Land Use Perm For The Construction Of New One & The local T
e setback must be measured must be visible from the proposed site of the structure, or must be	quired setback, the boundary line from which the compass from a known corner within 500 feet of	constitutions or a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback conner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the propreyor at the owner's expense.  Stake or Mark Proposed I oration(s) of New Construction Sentic Tank (CT) Death field (DE) Holding Tank (LT)	one previously surveyed coner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.  (9) Stake or Mark Proposed I oration(s) of New Construction. Sentic Tank (ST) Drain field (DE) United Tank (UT) Drain field (DE) UNITED (DE) United Tank (UT) Drain field (DE) United Tank (UT) Drain field (DE) United Tank (UT) Drain field (DE) UNITED (DE) United Tank (UT) Drain field (DE) UNITED (DE) United Tank (UT) Drain field (DE) UNITED (DE)
e visible from one previously surveyed corner to the	from which the setback must be measured must be visible	f the minimum required setback, the boundary line fronwner's expense.	Fior to the placement or construction of a structure within ten (10) feet or other previously surveyed corner or marked by a licensed surveyor at the construction the construction of the
		>{o` Feet	Setback to <b>Drain Field</b> Setback to <b>Privy</b> (Portable, Composting)
Feet Feet	cto Well	>5 Feet	Setback to Septic Tank or Holding Tank
√ (⇔) Feet Feet	Setback from 20% Slope Area Elevation of Floodplain	Feet	Setback from the <b>West</b> Lot Line
	Setback from Wetland	>\O\) Feet	Setback from the <b>South</b> Lot Line
	k from the Bank or Bluff	reet Setback	Control of At 11 at 15
(C)	from	Feet Setback	Setback from the Centerline of Platted Road  Setback from the Established Right-of-May
Measurement	Description	Measurement	Description
Changes in plans must be approved by the Planning & Zoning Dept.	Changes in plans must be ap	est point)	(8) Setbacks: (measured to the closest point)
The state of the s	- Converse		Please complete (1) (7) above (prior to continuing)
		SA THERE	
		,	
- Taba			
		***************************************	
d/or (*)	ield (DF); (*) Holding Tank (HT) an	All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%	
	roottago Rood)	Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)	Show Location of: Show / Indicate: Show Location of (*):
4	for)	Blow Draw or Sketch your Property (regardless of what you are applying for)	below Draw or Sketch your Property





- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- Show the location, size and dimensions of attached deck(s), porch(s) or garage Show the location, size and dimensions of the structure
- က
- Show the location of the well, holding tank, septic tank and drain field.

DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

IMPORTANT

- Ġ Show the location of any lake, river, stream or pond if applicable
- တ Show the location of other existing structures.
- Show the location of any wetlands or slopes over 20 percent.
- Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Building to lake, river, stream or pond
- Ö Holding tank to closest lot line
- Holding tank to building

- closest lot line
- - Holding Holding tank to well Holding tank to lake, river, stream or pond

- Privy to building
- Privy to lake, river, stream or pond
- Septic Tank and Drain field to closest lot line Septic Tank and Drain field to building
- m. Septic Tank and Drain field to well
- Septic Tank, and Drain field to lake, river, stream or pond.
- Ģ Well to building

\*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued.

For The Construction Of New One & Two Family Dwellings: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.
You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

will not make an inspection until location(s) are staked or marked Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector